

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

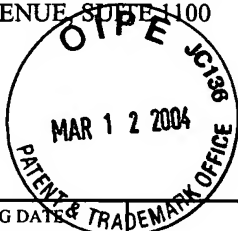
Mail Stop ISSUE FEE
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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26753 7590 02/12/2004

ANDRUS, SCEALES, STARKE & SAWALL, LLP
 100 EAST WISCONSIN AVENUE, SUITE 1100
 MILWAUKEE, WI 53202



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| | |
|--------------------------|--------------------|
| VERONICA K. HAUPT | (Depositor's name) |
| <i>Veronica K. Haupt</i> | (Signature) |
| 3-9-04 | (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/654,791 | 09/04/2003 | Gordon G. Sansom | 3848-00683 | 5503 |

TITLE OF INVENTION: ARRANGEMENT FOR PREVENTING OVERFILL OF ANESTHETIC LIQUID

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1330 | \$300 | \$1630 | 05/12/2004 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|-------------------|----------|----------------|
| DOUGLAS, STEVEN O | 3751 | 141-198000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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1 _____
 2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Datex-Ohmeda, Inc.

Madison, WI 53707-7550 USA

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee
☒ Advance Order - # of Copies 10

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(Authorized Signature)

(Date)

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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03/15/2004 BSAYAS12 00000026 10654791

01 FC:1501
 02 FC:1504
 03 FC:8001

1330.00 OP
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TRANSMIT THIS FORM WITH FEE(S)



Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

| | | | |
|---|--|--|--------|
| PTO/SB/17 (10/97) | | Application Number 10/654,791 | |
| FEE TRANSMITTAL | | Filing Date 09/04/2003 | |
| | | First Named Inventor Gordon G. Sansom | |
| | | Group Art Unit 3751 | |
| | | Examiner Name Douglas, Steven O. | |
| Total Amount of Payment \$1,660.00 | | Attorney Docket Number 3848-00683 | |
| METHOD OF PAYMENT (check one) | | FEE CALCULATION (continued) | |
| 1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number <u>01.2010</u> Deposit Account Name <u>ANDRUS, SCEALES, STARKE & SAWALL</u> <input checked="" type="checkbox"/> Charge any additional fee required under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge the Issue Fee set in 37 CFR 1.18 at the Mailing Of the Notice of Allowance, 37 CFR 1.311(b) | | 2. Additional Fees Large Entity Small Entity Fee Fee Fee Fee Code (\$) Code (\$) Fee Description Fee Paid 105 130 205 65 Surcharge-late filing fee or oath _____ 127 50 227 25 Surcharge-late provisional filing fee _____ or cover sheet 139 130 139 130 Non-English specification _____ 147 2,520 147 2,520 For filing a request for reexamination _____ 112 920* 112 920* Requesting publication of SIR prior to _____ Examiner action 113 1,840* 113 1,840* Requesting publication of SIR after _____ Examiner action 115 110 215 55 Extension for response within first _____ month 116 400 216 200 Extension for response within second _____ month 117 950 217 475 Extension for response within third _____ month 118 1,510 218 755 Extension for response within fourth _____ month 128 2,060 228 1,030 Extension for response within fifth _____ month 119 310 219 155 Notice of appeal _____ 120 310 220 155 Filing a brief in support of an appeal _____ 121 270 221 135 Request for oral hearing _____ 138 1,510 138 1,510 Petition to institute a public use _____ proceeding 140 110 240 55 Petition to revive unavoidably _____ abandoned application 141 1,320 241 660 Petition to revive unintentionally _____ abandoned application 142 1,210 242 605 Utility issue fee (or reissue) <u>\$1,330</u> 143 450 243 225 Design issue fee _____ 144 670 244 335 Plant issue fee _____ 122 130 122 130 Petitions to the Commissioner _____ 123 50 123 50 Petitions related to provisional _____ applications 126 240 126 240 Submission of Information Disclosure _____ Statement 581 40 581 40 Recording each patent assignment per _____ property (times number of properties 146 790 246 395 Filing a submission after final rejection _____ (37 CFR 1.129(a)) 149 790 249 395 For each additional invention to be _____ examined (37 CFR 1.129(b)) Other fee (specify) <u>Additional Patent Copies</u> <u>30</u> Other fee (specify) <u>Publication Fee</u> <u>300</u> SUBTOTAL (3) <u>\$1,660.00</u> *Reduced by Basic Filing Fee Paid | |
| 3. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other | | | |
| FEE CALCULATION (fees effective 10/01/97) | | | |
| 1. Filing Fee Large Entity Small Entity Fee Fee Fee Fee Code (\$) Code (\$) Fee Description Fee Paid 101 790 201 395 Utility filing fee _____ 106 330 206 165 Design filing fee _____ 107 540 207 270 Plant filing fee _____ 108 790 208 395 Reissue filing fee _____ 114 150 214 75 Provisional filing fee _____ SUBTOTAL (1) <u>(\$ 0)</u> | | | |
| 2. Claims Extra Fee from Fee Paid Total claims -20= X = _____ Independent - 3= X = _____ Claims Multiple Dependent X = _____ Claims Large Entity Small Entity Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Description 103 22 203 11 Claims in excess of 20 102 82 202 41 Independent claims in excess of 3 104 270 204 135 Multiple dependent claim 109 82 209 41 Reissue independent claims over original patent 110 22 210 11 Reissue claims in excess of 20 and over original patent SUBTOTAL (2) <u>(\$ 0)</u> | | | |
| SUBMITTED BY | | COMPLETE (if applicable) | |
| Type or Printed name | Joseph D. Kuborn Andrus, Scales, Starke & Sawall, LLP | Registration Number | 40,689 |
| Signature | | Date | 3/9/04 |
| | | Deposit Account User ID | |